



ACCREDITATION ASSOCIATION  
for AMBULATORY HEALTH CARE, INC.

# Notice of Survey

## Indicate AAAHC Program related to this Notice of Survey

- Ambulatory Accreditation
- Medicare Deemed Status Accreditation
- Health Plans Accreditation
- Health Plans FEHB Accreditation
- Advanced Orthopaedic Certification
- Patient-Centered Medical Home Certification

AAAHC Organization ID 108370 Organization Legal Name Special Agents Mutual Benefit Association  
 Organization "Doing Business As" Name SAMBA

- This is an Unannounced Survey ~ **OR** ~  Survey date(s) for this Announced Survey February 19-21, 2025

The above-named organization has voluntarily requested this accreditation/certification survey as a means of having a third-party review to build upon strengths or identify opportunities to improve its delivery of safe, high-quality health care to its patients and/or members. The survey will evaluate the organization's compliance with AAAHC Standards and to determine if accreditation/certification should be awarded to, or retained by, this organization.

The general public, patients, members, and employees, believing that they have relevant and valid information about this organization's provision of services or compliance with AAAHC Standards, may request to present this information to AAAHC Surveyors at the time of the survey *or* may communicate such information in writing or by telephone to the AAAHC office.

All information received from identified individuals at or prior to the survey will be considered in making the accreditation/certification decision. The information presented will not be debated with the reporting individual.

A request to present or report information may be communicated in writing by mail to the address below; by email to [feedback@aaahc.org](mailto:feedback@aaahc.org); or by telephone or fax to the numbers below.

### Accreditation Association for Ambulatory Health Care, Inc.

3 Parkway North, Suite 201 TEL: 847.853.6060  
 Deerfield, IL 60015 FAX: 847.853.9028

*The organization must post the Notice prominently for at least 30 calendar days or through the end of the survey, **whichever is later.***

Date Posted 01/17/2025 Staff Name Pamela Lynch Title Executive Director